



## IMAGING AND DIAGNOSTIC TESTING

### IMPACT OF CORONARY CT ANGIOGRAPHY ON THE BEHAVIOR OF PHYSICIANS AND PATIENTS IN AN ASYMPTOMATIC POPULATION

ACC Poster Contributions

Georgia World Congress Center, Hall B5

Sunday, March 14, 2010, 3:30 p.m.-4:30 p.m.

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Session Title: CT Coronary Angiography and Post Resource Utilization

Abstract Category: CT Coronary Angiography

Presentation Number: 1088-188

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**Background:** The impact of incorporating coronary CT angiography (CCTA) into a cardiac screening program has not been evaluated.

**Methods:** We studied a cohort of 2,000 asymptomatic South Korean subjects from a self-referred health screening program. We enrolled 1,000 consecutive asymptomatic patients who underwent CCTA, and a control group of 1,000 patients matched for age, gender, and calculated cardiac risk that did not undergo CCTA. Referral for secondary tests, adverse cardiovascular events, and medication use at 90 days (short-term) and at 18 months (midterm) was then analyzed.

**Results:** 215 patients in the CCTA group had coronary plaque (CCTA positive). There were more secondary tests (55 vs. 22) and revascularization procedures (12 vs. 1) in the CCTA group compared to controls with majority of them occurring in the CCTA positive group. There were more statin (37% vs. 5% vs. 8%) and aspirin (48% vs. 6% vs. 8%) prescriptions at the index visit in the CCTA positive group compared to the CCTA negative and control groups. Overall an increase in medication use was seen at midterm (statin 20% vs. 3% vs. 6%; aspirin 25% vs. 3% vs. 6%) in the respective groups. During midterm follow-up, only one hard cardiac event was observed in the control group.

**Conclusions:** In a low risk asymptomatic population CCTA screening led to an increased use in cardiovascular prevention medications, downstream testing and and revascularization procedures mainly in the CCTA positive group, Long term follow is needed to assess if this effort translates into improved hard clinical outcomes to assess appropriateness of this imaging modality in an asymptomatic low risk population.